

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known): _____

Chapter you are filing under:

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

Check if this is an amended filing

JEFFREY P. ALLSTEADT, CLERK
INTAKE 2

FILED
UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
OCT 20 2017

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

About Debtor 1:

BONNIE

First Name

K

Middle Name

EBERT

Last Name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First Name

Middle Name

Last Name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First Name

Middle Name

Last Name

First Name

Middle Name

Last Name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

XXX - XX - 6 4 5 8

OR

9xx - xx - _____

XXX - XX - _____

OR

9xx - xx - _____

Debtor 1 BONNIE K EBERT

Case number (if known) _____

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

About Debtor 1:

I have not used any business names or EINs.

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business names or EINs.

Business name _____

EIN _____

EIN _____

EIN _____

EIN _____

5. Where you live

816 GENESEE DRIVE

Number Street _____

Number Street _____

NAPERVILLE IL 60563

City _____

State _____

ZIP Code _____

Kane

DePage

County _____

City _____

State _____

ZIP Code _____

County _____

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street _____

Number Street _____

P.O. Box _____

P.O. Box _____

City _____

State _____

ZIP Code _____

City _____

State _____

ZIP Code _____

6. Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7

Chapter 11

Chapter 12

Chapter 13

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

8. How you will pay the fee

I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).

I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

No
 Yes.

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

No
 Yes.

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
MM / DD / YYYY if known

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
MM / DD / YYYY if known

11. Do you rent your residence?

No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
 No. Go to line 12.
 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

BONNIE K EBERT

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.
 Yes. Name and location of business

YOUR INSPIRED LIFE

Name of business, if any

816 GENESSE DRIVE

Number Street

NAPERVILLE

City

IL

State

60563

ZIP Code

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
 Stockbroker (as defined in 11 U.S.C. § 101(53A))
 Commodity Broker (as defined in 11 U.S.C. § 101(6))
 None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

No. I am not filing under Chapter 11.
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

No
 Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number Street

City

State

ZIP Code

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
 No. Go to line 16b.
 Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
 No. Go to line 16c.
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer or business debts.

17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
 No
 Yes

18. How many creditors do you estimate that you owe?

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input checked="" type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input checked="" type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor 1 BONNIE K EBERT Case number (if known) _____

Part 7: Sign Below

For you

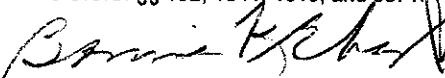
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X 

BONNIE K EBERT, Debtor 1

X

Signature of Debtor 2

Executed on 10/20/2017
MM / DD / YYYY

Executed on _____

MM / DD / YYYY

Debtor 1

BONNIE K EBERT

Case number (if known) _____

For you if you are filing this bankruptcy without an attorney

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

If you are represented by an attorney, you do not need to file this page.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

No
 Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

No
 Yes. Name of Person Edward J Gremo Jr
Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

X 
BONNIE K EBERT, Debtor 1

X _____
Signature of Debtor 2

Date 10/20/2017
MM / DD / YYYY

Date _____
MM / DD / YYYY

Contact phone (630) 717-5831
Cell phone (630) 251-0141
Email address BKEBERT@EARTHLINK.NI

Contact phone _____
Cell phone _____
Email address _____

Fill in this information to identify your case:

Debtor 1	BONNIE First Name	K Middle Name	EBERT Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets

	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B.....	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B.....	\$52,750.00
1c. Copy line 63, Total of all property on Schedule A/B.....	\$52,750.00

Part 2: Summarize Your Liabilities

	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D....	\$153,639.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ \$149,456.00
	\$303,095.00

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)	\$4,454.74
Copy your combined monthly income from line 12 of Schedule I.....	\$4,454.74
5. Schedule J: Your Expenses (Official Form 106J)	\$4,276.16
Copy your monthly expenses from line 22c of Schedule J.....	\$4,276.16

Debtor 1 BONNIE K EBERT

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$3,627.58

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
9g. Total. Add lines 9a through 9f.	\$0.00

Fill in this information to identify your case and this filing:

Debtor 1	BONNIE	K	EBERT
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)		<input type="checkbox"/> Check if this is an amended filing	

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.
 Yes. Where is the property?

1.1.

816 GENESEE DRIVE

Street address, if available, or other description

NAPERVILLE IL 60563
City State ZIP Code

DUPAGE
County

CONDOMINIUM

What is the property?

Check all that apply.

Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other

Who has an interest in the property? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: 07-09-310-078

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$0.00

Current value of the portion you own?

\$0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

FEE SIMPLE

Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....



\$0.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No
 Yes

Debtor 1	BONNIE K EBERT	Case number (if known)
3.1.		
Make:	SUBURU	Who has an interest in the property? Check one.
Model:	FORESTER	<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another
Year:	2015	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
Approximate mileage:	26,000	Current value of the entire property? \$0.00
Other information:	2015 SUBURU FORESTER (approx. 26000 miles)	
□ Check if this is community property (see instructions)		

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**
Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here..... → **\$0.00**

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. **Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

No
 Yes. Describe.... **COUCH, KITCHEN TABLE & CHAIRS, RECLINER, COFFEE TABLE,POTS,PANS, BED, DRESSER** **\$600.00**

7. **Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No
 Yes. Describe.... **LAPTOP,PRINTER,TV** **\$150.00**

8. **Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No
 Yes. Describe....

9. **Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No
 Yes. Describe....

10. **Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No
 Yes. Describe....

11. **Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No
 Yes. Describe.... **DRESSES,SHORTS,PANTS** **\$75.00**

Debtor 1 BONNIE K EBERT Case number (if known) _____

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.... **WATCH,EARRINGS,**

\$75.00

13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe....

14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here..... →

\$900.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes..... Cash: \$500.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes..... Institution name:

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes..... Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

No

Yes. Give specific information about them..... Name of entity: % of ownership:

DRONE LANDING PAD SYSTEMS INC

Unknown

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them..... Issuer name:

Debtor 1 BONNIE K EBERT

Case number (if known) _____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each

account separately. Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes.....

Institution name or individual:

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)

No

Yes..... Issuer name and description:

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

No

Yes. Give specific information about them

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them

Money or property owed to you?

**Current value of the portion you own?
Do not deduct secured claims or exemptions.**

28. Tax refunds owed to you

No

Yes. Give specific information Federal: IRS REFUND,ILLINOIS STATE REFUND. Amt:
about them, including whether \$1,300.00
you already filed the returns
and the tax years.....

Federal: \$1,300.00

State: \$0.00

Local: \$0.00

Debtor 1 BONNIE K EBERT Case number (if known) _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information **CASH**

\$50,000.00

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

No

Yes. Give specific information

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Yes. Describe each claim.....

35. Any financial assets you did not already list

No

Yes. Give specific information

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.

\$51,800.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

No. Go to Part 6.

Yes. Go to line 38.

Debtor 1 BONNIE K EBERT Case number (if known) _____

Current value of the portion you own?
Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

No
 Yes. Describe..

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No
 Yes. Describe.. DESK,BOOKCASE

\$50.00

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

No
 Yes. Describe..

41. Inventory

No
 Yes. Describe..

42. Interests in partnerships or joint ventures

No
 Yes. Describe.... Name of entity: % of ownership:

43. Customer lists, mailing lists, or other compilations

No
 Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?
 No
 Yes. Describe....

44. Any business-related property you did not already list

No
 Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here → \$50.00

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.**

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Current value of the portion you own?
Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

No
 Yes....

Debtor 1 BONNIE K EBERT Case number (if known) _____

48. Crops—either growing or harvested

No
 Yes. Give specific information.....

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No
 Yes....

50. Farm and fishing supplies, chemicals, and feed

No
 Yes....

51. Any farm- and commercial fishing-related property you did not already list

No
 Yes. Give specific information.....

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... → \$0.00

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No
 Yes. Give specific information.

54. Add the dollar value of all of your entries from Part 7. Write that number here..... → \$0.00

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... → \$0.00

56. Part 2: Total vehicles, line 5 \$0.00

57. Part 3: Total personal and household items, line 15 \$900.00

58. Part 4: Total financial assets, line 36 \$51,800.00

59. Part 5: Total business-related property, line 45 \$50.00

60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

61. Part 7: Total other property not listed, line 54 \$0.00

62. Total personal property. Add lines 56 through 61..... \$52,750.00

Copy personal property total → + \$52,750.00

63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$52,750.00

Fill in this information to identify your case:

Debtor 1	BONNIE	K	EBERT
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
--	--------------------------------------	-----------------------------------	------------------------------------

Brief description: CONDOMINIUM	\$0.00	<input checked="" type="checkbox"/> \$0.00	
Parcel: 07-09-310-078		<input type="checkbox"/>	100% of fair market value, up to any applicable statutory limit

Line from *Schedule A/B*: 1.1

Brief description: COUCH, KITCHEN TABLE & CHAIRS, RECLINER, COFFEE TABLE, POTS, PANS, BED, DRESSER	\$600.00	<input checked="" type="checkbox"/> \$600.00	
Line from <i>Schedule A/B</i> : <u>6</u>		<input type="checkbox"/>	100% of fair market value, up to any applicable statutory limit

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
 No
 Yes

Debtor 1

BONNIE K EBERT

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
---	--------------------------------------	-----------------------------------	------------------------------------

Copy the value from Schedule A/B

Brief description: LAPTOP,PRINTER,TV	<u>\$150.00</u>	<input checked="" type="checkbox"/> \$150.00
--	-----------------	---

Line from Schedule A/B: 7

Check only one box for each exemption

100% of fair market value, up to any applicable statutory limit

Brief description: DRESSES,SHORTS,PANTS	<u>\$75.00</u>	<input checked="" type="checkbox"/> \$75.00
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Line from Schedule A/B: <u>11</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit
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Brief description: WATCH,EARRINGS,	<u>\$75.00</u>	<input checked="" type="checkbox"/> \$75.00
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Line from Schedule A/B: <u>12</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit
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Brief description: CASH	<u>\$500.00</u>	<input checked="" type="checkbox"/> \$500.00
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Line from Schedule A/B: <u>16</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit
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Brief description: DRONE LANDING PAD SYSTEMS INC	<u>Unknown</u>	<input checked="" type="checkbox"/> \$0.00
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Line from Schedule A/B: <u>19</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit
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Brief description: IRS REFUND,ILLINOIS STATE REFUND	<u>\$1,300.00</u>	<input checked="" type="checkbox"/> \$1,300.00
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Line from Schedule A/B: <u>28</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit
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Brief description: CASH	<u>\$50,000.00</u>	<input checked="" type="checkbox"/> \$1,300.00
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Line from Schedule A/B: <u>30</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit
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Brief description: DESK,BOOKCASE	<u>\$50.00</u>	<input checked="" type="checkbox"/> \$0.00
--	----------------	---

Line from Schedule A/B: <u>39</u>		<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit
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**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)**

IN RE: **BONNIE K EBERT**

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
1.	Real property	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
3.	Motor vehicles (cars, etc.)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
4.	Water/Aircraft, Motor Homes, Rec. veh. and access.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
6.	Household goods and furnishings	\$600.00	\$0.00	\$600.00	\$600.00	\$0.00
7.	Electronics	\$150.00	\$0.00	\$150.00	\$150.00	\$0.00
8.	Collectibles of value	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
9.	Equipment for sports and hobbies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
10.	Firearms	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
11.	Clothes	\$75.00	\$0.00	\$75.00	\$75.00	\$0.00
12.	Jewelry	\$75.00	\$0.00	\$75.00	\$75.00	\$0.00
13.	Non-farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
14.	Unlisted pers. and household items-incl. health aids	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
16.	Cash	\$500.00	\$0.00	\$500.00	\$500.00	\$0.00
17.	Deposits of money	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
18.	Bonds, mutual funds or publicly traded stocks	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
19.	Non-pub. traded stock and int. in businesses	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
20.	Govt. and corp. bonds and other instruments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
21.	Retirement or pension accounts	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
22.	Security deposits and prepayments	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
23.	Annuities	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
24.	Interests in an education IRA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
25.	Trusts, equit. or future int. (not in line 1)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
26.	Patents, copyrights, and other intellectual prop.	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
27.	Licenses, franchises, other general intangibles	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
28.	Tax refunds owed to you	\$1,300.00	\$0.00	\$1,300.00	\$1,300.00	\$0.00

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)**

IN RE: **BONNIE K EBERT**

CASE NO.

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 1

Exemption Totals by Category:

(Values and liens of surrendered property are NOT included in this section)

Scheme Selected: **State**

No.	Category	Gross Property Value	Total Encumbrances	Total Equity	Total Amount Exempt	Total Amount Non-Exempt
29.	Family support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
30.	Other amounts someone owes you	\$50,000.00	\$0.00	\$50,000.00	\$1,300.00	\$48,700.00
31.	Interests in insurance policies	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
32.	Any int. in prop. due you from someone who has died	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
33.	Claims vs. third parties, even if no demand	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
34.	Other contin. and unliq. claims of every nature	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
35.	Any financial assets you did not already list	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
38.	Accounts rec. or commissions you already earned	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
39.	Office equipment, furnishings, and supplies	\$50.00	\$0.00	\$50.00	\$0.00	\$50.00
40.	Mach., fixt., equip., bus. suppl., tools of trade	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
41.	Inventory	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
42.	Interests in partnerships or joint ventures	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
43.	Customer and mailing lists, or other compilations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
44.	Any business-related property not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
47.	Farm animals	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
48.	Crops—either growing or harvested	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
49.	Farm/fishing equip., impl., mach., fixt., tools	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
50.	Farm and fishing supplies, chemicals, and feed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
51.	Farm/commercial fishing-related prop. not listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
53.	Any other property of any kind not already listed	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOTALS:		\$52,750.00	\$0.00	\$52,750.00	\$4,000.00	\$48,750.00

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)

IN RE: BONNIE K EBERT

CASE NO

CHAPTER 7

SCHEDULE C-1 (SUPPLEMENTAL EXEMPTION ANALYSIS)

Continuation Sheet # 2

Surrendered Property:

The following property is to be surrendered by the debtor. Although this property is NOT exempt, it is NOT considered "non-exempt" for purposes of this analysis. The below listed items are to be returned to the lienholder.

Property Description	Market Value	Lien	Equity
Real Property			
(None)			
Personal Property			
(None)			
TOTALS:	\$0.00	\$0.00	\$0.00

Non-Exempt Property by Item:

The following property, or a portion thereof, is non-exempt.

Property Description	Market Value	Lien	Equity	Non-Exempt Amount
Real Property				
(None)				
Personal Property				
CASH	\$50,000.00	\$50,000.00		\$48,700.00
DESK,BOOKCASE	\$50.00	\$50.00		\$50.00
TOTALS:	\$50,050.00	\$0.00	\$50,050.00	\$48,750.00

Summary	
A. Gross Property Value (not including surrendered property)	\$52,750.00
B. Gross Property Value of Surrendered Property	\$0.00
C. Total Gross Property Value (A+B)	\$52,750.00
D. Gross Amount of Encumbrances (not including surrendered property)	\$0.00
E. Gross Amount of Encumbrances on Surrendered Property	\$0.00
F. Total Gross Encumbrances (D+E)	\$0.00
G. Total Equity (not including surrendered property) / (A-D)	\$52,750.00
H. Total Equity in surrendered items (B-E)	\$0.00
I. Total Equity (C-F)	\$52,750.00
J. Total Exemptions Claimed	\$4,000.00
K. Total Non-Exempt Property Remaining (G-J)	\$48,750.00

Fill in this information to identify your case:

Debtor 1 First Name	BONNIE	K	EBERT
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion if any

2.1	Describe the property that secures the claim:	\$19,023.00	\$15,165.00	\$3,858.00
-----	---	-------------	-------------	------------

BANK OF AMERICA

Creditor's name

9000 SOUTHSIDE BLVD BLDG600

Number Street

Describe the property that secures the claim:

PERSONAL AUTO

JACKSONVILLE FL 32256
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who owes the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Nature of lien. Check all that apply.

An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset)

Purchase Money

Date debt was incurred 10/2016

Last 4 digits of account number

7 5 3 9

Add the dollar value of your entries in Column A on this page. Write that number here:

\$19,023.00

Debtor 1	BONNIE K EBERT	Case number (if known)		
Additional Page Part 1: After listing any entries on this page, number them sequentially from the previous page.		Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion if any

2.2	Describe the property that secures the claim:	\$134,616.00	\$144,000.00
-----	---	--------------	--------------

WELLS FARGO
Creditor's name
3476 STATEVIEW BLVD
Number Street

PRIMARY RESIDENCE

FORT MILL **SC** **29715**
City State ZIP Code

Who owes the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

Purchase Money

Date debt was incurred 09/2010 Last 4 digits of account number 9 9 3 8

Add the dollar value of your entries in Column A on this page. Write that number here:

\$134,616.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$153,639.00

Fill in this information to identify your case:

Debtor 1	BONNIE	K	EBERT
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority amount	Nonpriority amount
_____	_____	_____

2.1

Priority Creditor's Name

Last 4 digits of account number

Number Street

When was the debt incurred?

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

Who incurred the debt? Check one.

Type of PRIORITY unsecured claim:

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Domestic support obligations
 Taxes and certain other debts you owe the government
 Claims for death or personal injury while you were intoxicated
 Other. Specify _____

Is the claim subject to offset?

No
 Yes

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

Total claim

4.1

\$15,082.00

AMERICAN EXPRESS

Nonpriority Creditor's Name

BOX 0001

Number Street

Last 4 digits of account number **1 0 0 2**

When was the debt incurred? **01/2016**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

LOS ANGELES CA 90096-8000

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Credit Card

Is the claim subject to offset?

No
 Yes

4.2

Unknown

AMERICAN EXPRESS

Nonpriority Creditor's Name

PO BOX 7871

Number Street

Last 4 digits of account number **5 3 3 3**

When was the debt incurred? **12/2003**

As of the date you file, the claim is: Check all that apply.

Contingent
 Unliquidated
 Disputed

FORT LAUDERDALE FL 33329

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify
Credit Card

Is the claim subject to offset?

No
 Yes

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3

ASSOCIATED BANK

Nonpriority Creditor's Name

PO BOX 790408

Number Street

Last 4 digits of account number 3 0 3 2

When was the debt incurred? 01/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

ST LOUIS MO 63179

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

\$10,300.00

4.4

BARCLAYCARD

Nonpriority Creditor's Name

CARD SERVICES

Number Street

PO BOX 60517

Last 4 digits of account number 7 9 3 0

When was the debt incurred? 01/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

CITY OF INDUSTRY CA 91716-0517

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

\$17,473.00

4.5

CABELAS CLUB VISA

Nonpriority Creditor's Name

PO BOX 82519

Number Street

Last 4 digits of account number 5 6 7 5

When was the debt incurred? 01/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

LINCOLN NE 68501-2519

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

\$12,928.00

Debtor 1 BONNIE K EBERT

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim _____

4.6

Unknown

CAP ONE

Nonpriority Creditor's Name
1441 SCHILING PLACE

Number Street

Last 4 digits of account number 1 1 1 7

When was the debt incurred? 01/2010

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SALINAS CA 93901

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.7

Unknown

CAP1/CARSN

Nonpriority Creditor's Name
PO BOX 15524

Number Street

Last 4 digits of account number 8 9 7 1

When was the debt incurred? 12/2006

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

WILIMINGTON DE 19850

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.8

\$21,336.00

CAPITLA ONE BANK NA

Nonpriority Creditor's Name
PO BOX 6492

Number Street

Last 4 digits of account number 3 0 9 5

When was the debt incurred? 01/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

CAROL STREAM IL 60197-6492

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim _____

4.9

CB/ANNTYLR

Nonpriority Creditor's Name

PO BOX 182273

Number Street

Last 4 digits of account number **9 7 9 4**

When was the debt incurred? **09/2011**

Unknown

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

COLUMBUS OH 43218

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.10

CBNA

Nonpriority Creditor's Name

13200 SMITH ROAD

Number Street

Last 4 digits of account number **B E R T**

When was the debt incurred? **05/2008**

Unknown

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

CLEVELAND OH 44130

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.11

\$23,381.00

CHASE

Nonpriority Creditor's Name

PO BOX 15123

Number Street

Last 4 digits of account number **6 3 4 0**

When was the debt incurred? **01/2016**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

WILMINGTON DE 19850-5123

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim _____

4.12

Unknown

CITI

Nonpriority Creditor's Name

PO BOX 6500

Number Street

Last 4 digits of account number 4 2 2 2

When was the debt incurred? 12/2010

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

SD 57117

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

\$11,176.00

4.13

DISCOVER CARD

Nonpriority Creditor's Name

PO BOX 6103

Number Street

Last 4 digits of account number 8 5 5 1

When was the debt incurred? 01/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

IL 60197-6103

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

\$200.00

4.14

DUPAGE MEDICAL GROUP

Nonpriority Creditor's Name

15921 COLLECTIONS CENTER DRIVE

Number Street

Last 4 digits of account number 1 1 0 7

When was the debt incurred? 09/2017

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

IL 60693-0159

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
MEDICAL BILL

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim _____

4.15

\$10,161.00

ELAN FINANCIAL SERVICE

Nonpriority Creditor's Name
777 EAST WISCONSIN AVE

Number Street _____

Last 4 digits of account number **B E R T**

When was the debt incurred? **06/2017**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

MILWAUKEE WI 53202

City State ZIP Code _____

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

4.16

Unknown

KOHL/CHASE

Nonpriority Creditor's Name
N56 W17000 RIDGEWOOD DRIVE

Number Street _____

Last 4 digits of account number **5 5 5 2**

When was the debt incurred? **06/1995**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

MENOMONEE FALLS WI 53051

City State ZIP Code _____

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

4.17

Unknown

KOHLS/CAP1

Nonpriority Creditor's Name
PO BOX 3115

Number Street _____

Last 4 digits of account number **9 0 7 2**

When was the debt incurred? **11/2011**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

MILWAUKEE WI 53201

City State ZIP Code _____

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim _____

4.18

\$14,491.00

STATE FARM BANK

Nonpriority Creditor's Name

PO BOX 23025

Number Street

Last 4 digits of account number 8 6 4 1

When was the debt incurred? 01/2016

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

COLUMBUS GA 31902-3025

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

4.19

Unknown

SYNCB/LORD & TAYLOR

Nonpriority Creditor's Name

PO BOX 981400

Number Street

Last 4 digits of account number B E R T

When was the debt incurred? 03/1993

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

EL PASO TX 79998

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

4.20

Unknown

VON MAUR

Nonpriority Creditor's Name

6565 BRADY

Number Street

Last 4 digits of account number 4 6 7 9

When was the debt incurred? 02/2013

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

DAVENPORT IA 52806

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.21

\$12,928.00

WORLDS FOREMOST BANK

Nonpriority Creditor's Name

4800 Nw 1st

Number Street

STE 300

Last 4 digits of account number **B E R T**

When was the debt incurred? **06/2016**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

LINCOLN NE 68521

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify
Credit Card

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. <u>\$0.00</u>
	6b. Taxes and certain other debts you owe the government	6b. <u>\$0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
	6e. Total. Add lines 6a through 6d.	6d. <u>\$0.00</u>
		Total claim
Total claims from Part 2	6f. Student loans	6f. <u>\$0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u>\$149,456.00</u>
	6j. Total. Add lines 6f through 6i.	6j. <u>\$149,456.00</u>

Fill in this information to identify your case:

Debtor 1	BONNIE First Name	K Middle Name	EBERT Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this information to identify your case:

Debtor 1	BONNIE First Name	K Middle Name	EBERT Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
 No
 Yes

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this information to identify your case:			
Debtor 1	BONNIE First Name	K Middle Name	EBERT Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is:

- An amended filing
- A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal,
or self-employed work

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	NANNY	
Employer's name	JENNIFER REENAN	
Employer's address	329 EAST 6TH STREET	
	Number Street	Number Street
	_____	_____
	_____	_____
	_____	_____
HINSDALE	IL	60521-461
City	State	Zip Code
City	State	Zip Code

How long employed there? 5 YEARS

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <u>\$1,357.00</u>	<u></u>
3. Estimate and list monthly overtime pay.	3. + <u>\$0.00</u>	<u></u>
4. Calculate gross income. Add line 2 + line 3.	4. <u>\$1,357.00</u>	<u></u>

Debtor 1	BONNIE K EBERT	Case number (if known)	
		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	→ 4.	\$1,357.00	
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00	
5b. Mandatory contributions for retirement plans	5b.	\$0.00	
5c. Voluntary contributions for retirement plans	5c.	\$0.00	
5d. Required repayments of retirement fund loans	5d.	\$0.00	
5e. Insurance	5e.	\$0.00	
5f. Domestic support obligations	5f.	\$0.00	
5g. Union dues	5g.	\$0.00	
5h. Other deductions. Specify: _____	5h. +	\$0.00	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$1,357.00	
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	
8b. Interest and dividends	8b.	\$0.00	
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	
8d. Unemployment compensation	8d.	\$0.00	
8e. Social Security	8e.	\$597.50	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f.	\$0.00	
8g. Pension or retirement income	8g.	\$2,464.08	
8h. Other monthly income. Specify: TIAA CREF	8h. +	\$36.16	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$3,097.74	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$4,454.74	+ _____ = \$4,454.74
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.			
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.			
Specify: _____	11. +	\$0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.	12.	\$4,454.74	
Combined monthly income			
13. Do you expect an increase or decrease within the year after you file this form?			
<input checked="" type="checkbox"/> No. None.			
<input type="checkbox"/> Yes. Explain: _____			

Fill in this information to identify your case:

Debtor 1 First Name	BONNIE	K Middle Name	EBERT Last Name
Debtor 2 (Spouse, if filing) First Name		Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)			

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes
 No
 Yes

Do not state the dependents' names.

3. Do your expenses include expenses of people other than yourself and your dependents?

No
 Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

	<u>Your expenses</u>
4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.	4. <u>\$847.30</u>
If not included in line 4:	
4a. Real estate taxes	4a. <u>\$222.00</u>
4b. Property, homeowner's, or renter's insurance	4b. <u>\$52.05</u>
4c. Home maintenance, repair, and upkeep expenses	4c. <u></u>
4d. Homeowner's association or condominium dues	4d. <u>\$208.16</u>

Debtor 1	<u>BONNIE K EBERT</u>	Case number (if known)
<u>Your expenses</u>		
5.	Additional mortgage payments for your residence, such as home equity loans	5. _____
6.	Utilities:	
6a.	Electricity, heat, natural gas	6a. _____ \$110.00
6b.	Water, sewer, garbage collection	6b. _____
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. _____ \$297.61
6d.	Other. Specify: _____	6d. _____
7.	Food and housekeeping supplies	7. _____ \$485.00
8.	Childcare and children's education costs	8. _____ \$0.00
9.	Clothing, laundry, and dry cleaning	9. _____ \$400.00
10.	Personal care products and services	10. _____ \$300.00
11.	Medical and dental expenses	11. _____ \$340.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. _____ \$120.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. _____ \$200.00
14.	Charitable contributions and religious donations	14. _____
15.	Insurance.	
	Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. _____ \$81.00
15b.	Health insurance	15b. _____ \$220.00
15c.	Vehicle insurance	15c. _____ \$53.33
15d.	Other insurance. Specify: _____	15d. _____
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. _____
17.	Installment or lease payments:	
17a.	Car payments for Vehicle 1 SUBURU FORESTER	17a. _____ \$339.71
17b.	Car payments for Vehicle 2	17b. _____
17c.	Other. Specify: _____	17c. _____
17d.	Other. Specify: _____	17d. _____
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. _____
19.	Other payments you make to support others who do not live with you. Specify: _____	19. _____

Debtor 1 BONNIE K EBERT	Case number (if known) _____
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.	
20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____
21. Other. Specify: _____	21. + _____
22. Calculate your monthly expenses.	
22a. Add lines 4 through 21.	22a. _____ \$4,276.16
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. _____ \$4,276.16
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. _____ \$4,454.74
23b. Copy your monthly expenses from line 22c above.	23b. _____ \$4,276.16
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. _____ \$178.58
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:
None.

Fill in this information to identify your case:

Debtor 1	BONNIE First Name	K Middle Name	EBERT Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known) _____			

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person Edward J Gremo Jr

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X Bonnie K Ebert

BONNIE K EBERT, Debtor 1

Date 10/20/2017
MM / DD / YYYY

X _____

Signature of Debtor 2

Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	BONNIE First Name	K Middle Name	EBERT Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known)		<input type="checkbox"/> Check if this is an amended filing	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?
(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1

BONNIE K EBERT

Case number (if known) _____

Part 2: Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	Debtor 1	Debtor 2		
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$11,811.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the last calendar year: (January 1 to December 31, <u>2016</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$21,207.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
For the calendar year before that: (January 1 to December 31, <u>2015</u>) YYYY	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business	\$17,618.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	
5. Did you receive any other income during this year or the two previous calendar years?	Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.			
List each source and the gross income from each source separately. Do not include income that you listed in line 4.				
<input type="checkbox"/> No				
<input checked="" type="checkbox"/> Yes. Fill in the details.				
	Debtor 1	Debtor 2		
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of the current year until the date you filed for bankruptcy:	<u>Pension</u> <u>Social Security</u>	\$19,712.64 \$4,780.00 <u>Pension</u> <u>Social Security</u>		
For the last calendar year: (January 1 to December 31, <u>2016</u>) YYYY	<u>Pension</u> <u>Social Security</u>	\$30,887.00 \$9,416.00 <u>Pension</u> <u>Social Security</u>		
For the calendar year before that: (January 1 to December 31, <u>2015</u>) YYYY	<u>Pension</u> <u>Social Security</u>	\$30,882.00 \$8,893.00 <u>Pension</u> <u>Social Security</u>		

Debtor 1 BONNIE K EBERT Case number (if known) _____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
CITI CARDS Creditor's name PO BOX 9001016 Number Street	09/2017	\$2,092.00		<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input checked="" type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
LOUISVILLE KY 40290-1016 City State ZIP Code				
WELLS FARGO HOME MORTGAGE Creditor's name PO BOX 10394 Number Street	09/2017	\$1,120.57	\$134,616.16	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
DES MOINES IA 50306-0394 City State ZIP Code				
BANK OF AMERICA Creditor's name FL9-600-02-26 Number Street PO BOX 45224	09/2017	\$339.71	\$18,724.86	<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
JACKSONVILLE FL 32232-5224 City State ZIP Code				

Debtor 1 BONNIE K EBERT

Case number (if known) _____

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

No
 Yes. List all payments to an insider.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

No
 Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No
 Yes. Fill in the details.

Case title ARBITRATION CASE SUMMONS CREDIT CARD Nature of the case

Court or agency	Status of the case
<u>DUPAGE COUNTY JUDICIAL CENTER</u>	<input checked="" type="checkbox"/> Pending
Court Name	
<u>505 NORTH COUNTY FARM ROAD</u>	<input type="checkbox"/> On appeal
Number Street	
	<input type="checkbox"/> Concluded
<u>WHEATON</u>	<u>IL</u> <u>60187</u>
City	State ZIP Code

Case number 2017AR001298

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.
 Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No
 Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No
 Yes

Debtor 1 BONNIE K EBERT Case number (if known) _____

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No

Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No

Yes. Fill in the details.

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No

Yes. Fill in the details.

Debtor 1 **BONNIE K EBERT**

Case number (if known) _____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Debtor 1 BONNIE K EBERT Case number (if known) _____

25. Have you notified any governmental unit of any release of hazardous material?

No
 Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No
 Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
 A member of a limited liability company (LLC) or limited liability partnership (LLP)
 A partner in a partnership
 An officer, director, or managing executive of a corporation
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business

YOUR INSPIRED LIFE

Business Name

816 GENESSE DRIVE

Number Street

Name of accountant or bookkeeper

Employer Identification number

Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From _____ To _____

NAPERVILLE IL 60563
City State ZIP Code

Describe the nature of the business

YOUR INSPIRED LIFE

Business Name

816 GENESEE DRIVE

Number Street

Name of accountant or bookkeeper

Employer Identification number

Do not include Social Security number or ITIN.

EIN: _____

Dates business existed

From 01/2008 To CURRENT

NAPERVILLE IL 60563
City State ZIP Code

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No
 Yes. Fill in the details below.

Debtor 1 BONNIE K EBERT Case number (if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X 
BONNIE K EBERT, Debtor 1
Date 10/20/2017

X _____
Signature of Debtor 2
Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No
 Yes. Name of person Edward J Gremo Jr

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:			
Debtor 1	BONNIE First Name	K Middle Name	EBERT Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS			
Case number (if known) _____			

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.
Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: *Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral

What do you intend to do with the property that secures a debt?

Did you claim the property as exempt on Schedule C?

Creditor's name: **BANK OF AMERICA**

Surrender the property.
 Retain the property and redeem it.

No
 Yes

Description of property securing debt: **PERSONAL AUTO**

Retain the property and enter into a *Reaffirmation Agreement*.
 Retain the property and [explain]:

Creditor's name: **WELLS FARGO**

Surrender the property.

No
 Yes

Description of property securing debt: **PRIMARY RESIDENCE**

Retain the property and enter into a *Reaffirmation Agreement*.
 Retain the property and [explain]:

Debtor 1 BONNIE K EBERT Case number (if known) _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases

Will this lease be assumed?

None.

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X Bonnie K. Ebert X

BONNIE K EBERT, Debtor 1

Signature of Debtor 2

Date 10/20/2017

Date MM / DD / YYYY

MM / DD / YYYY

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)

IN RE: BONNIE K EBERT

CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 10/20/2017

Signature Bonnie K Ebert
BONNIE K EBERT

Date _____

Signature _____

AMERICAN EXPRESS
BOX 0001
LOS ANGELES CA 90096-8000

AMERICAN EXPRESS
PO BOX 7871
FORT LAUDERDALE FL 33329

ASSOCIATED BANK
PO BOX 790408
ST LOUIS MO 63179

BANK OF AMERICA
9000 SOUTHSIDE BLVD BLDG600
JACKSONVILLE FL 32256

BARCLAYCARD
CARD SERVICES
PO BOX 60517
CITY OF INDUSTRY CA 91716-0517

CABELAS CLUB VISA
PO BOX 82519
LINCOLN NE 68501-2519

CAP ONE
1441 SCHILING PLACE
SALINAS CA 93901

CAP1/CARSN
PO BOX 15524
WILIMINGTON DE 19850

CAPITLA ONE BANK NA
PO BOX 6492
CAROL STREAM IL 60197-6492

CB/ANNTYLR
PO BOX 182273
COLUMBUS OH 43218

CBNA
13200 SMITH ROAD
CLEVELAND OH 44130

CHASE
PO BOX 15123
WILMINGTON DE 19850-5123

CITI
PO BOX 6500
SIOUX FALLS SD 57117

DISCOVER CARD
PO BOX 6103
CAROL STREAM IL 60197-6103

DUPAGE MEDICAL GROUP
15921 COLLECTIONS CENTER DRIVE
CHICAGO IL 60693-0159

ELAN FINANCIAL SERVICE
777 EAST WISCONSIN AVE
MILWAUKEE WI 53202

KOHL/CHASE
N56 W17000 RIDGEWOOD DRIVE
MENOMONEE FALLS WI 53051

KOHLS/CAP1
PO BOX 3115
MILWAUKEE WI 53201

STATE FARM BANK
PO BOX 23025
COLUMBUS GA 31902-3025

SYNCB/LORD & TAYLOR
PO BOX 981400
EL PASO, TX 79998

VON MAUR
6565 BRADY
DAVENPORT IA 52806

WELLS FARGO
3476 STATEVIEW BLVD
FORT MILL SC 29715

WORLDS FOREMOST BANK
4800 Nw 1st
STE 300
LINCOLN NE 68521

AMERICAN EXPRESS BOX 0001 LOS ANGELES CA 90096-8000	CBNA 13200 SMITH ROAD CLEVELAND OH 44130	VON MAUR 6565 BRADY DAVENPORT IA 52806
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AMERICAN EXPRESS PO BOX 7871 FORT LAUDERDALE FL 33329	CHASE PO BOX 15123 WILMINGTON DE 19850-5123	WELLS FARGO 3476 STATEVIEW BLVD FORT MILL SC 29715
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ASSOCIATED BANK PO BOX 790408 ST LOUIS MO 63179	CITI PO BOX 6500 SIOUX FALLS SD 57117	WORLDS FOREMOST BANK 4800 Nw 1st STE 300 LINCOLN NE 68521
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BANK OF AMERICA 9000 SOUTHSIDE BLVD BLDG600 JACKSONVILLE FL 32256	DISCOVER CARD PO BOX 6103 CAROL STREAM IL 60197-6103
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BARCLAYCARD CARD SERVICES PO BOX 60517 CITY OF INDUSTRY CA 91716-0517	DUPAGE MEDICAL GROUP 15921 COLLECTIONS CENTER DRIVE CHICAGO IL 60693-0159
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CABELAS CLUB VISA PO BOX 82519 LINCOLN NE 68501-2519	ELAN FINANCIAL SERVICE 777 EAST WISCONSIN AVE MILWAUKEE WI 53202
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CAP ONE 1441 SCHILING PLACE SALINAS CA 93901	KOHL/CHASE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS WI 53051
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CAP1/CARSN PO BOX 15524 WILIMINGTON DE 19850	KOHLS/CAP1 PO BOX 3115 MILWAUKEE WI 53201
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CAPITLA ONE BANK NA PO BOX 6492 CAROL STREAM IL 60197-6492	STATE FARM BANK PO BOX 23025 COLUMBUS GA 31902-3025
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CB/ANNTYLR PO BOX 182273 COLUMBUS OH 43218	SYNCB/LORD & TAYLOR PO BOX 981400 EL PASO, TX 79998
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AMERICAN EXPRESS BOX 0001 LOS ANGELES CA 90096-8000	CBNA 13200 SMITH ROAD CLEVELAND OH 44130	VON MAUR 6565 BRADY DAVENPORT IA 52806
---	--	--

AMERICAN EXPRESS PO BOX 7871 FORT LAUDERDALE FL 33329	CHASE PO BOX 15123 WILMINGTON DE 19850-5123	WELLS FARGO 3476 STATEVIEW BLVD FORT MILL SC 29715
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ASSOCIATED BANK PO BOX 790408 ST LOUIS MO 63179	CITI PO BOX 6500 SIOUX FALLS SD 57117	WORLDS FOREMOST BANK 4800 Nw 1st STE 300 LINCOLN NE 68521
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BANK OF AMERICA 9000 SOUTHSIDE BLVD BLDG600 JACKSONVILLE FL 32256	DISCOVER CARD PO BOX 6103 CAROL STREAM IL 60197-6103
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BARCLAYCARD CARD SERVICES PO BOX 60517 CITY OF INDUSTRY CA 91716-0517	DUPAGE MEDICAL GROUP 15921 COLLECTIONS CENTER DRIVE CHICAGO IL 60693-0159
--	---

CABELAS CLUB VISA PO BOX 82519 LINCOLN NE 68501-2519	ELAN FINANCIAL SERVICE 777 EAST WISCONSIN AVE MILWAUKEE WI 53202
--	--

CAP ONE 1441 SCHILING PLACE SALINAS CA 93901	KOHL/CHASE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS WI 53051
--	--

CAP1/CARSN PO BOX 15524 WILIMINGTON DE 19850	KOHLS/CAP1 PO BOX 3115 MILWAUKEE WI 53201
--	---

CAPITLA ONE BANK NA PO BOX 6492 CAROL STREAM IL 60197-6492	STATE FARM BANK PO BOX 23025 COLUMBUS GA 31902-3025
--	---

CB/ANNTYLR PO BOX 182273 COLUMBUS OH 43218	SYNCB/LORD & TAYLOR PO BOX 981400 EL PASO, TX 79998
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UNITED STATES BANKRUPTCY COURT FOR THE

*NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)*

In re:
BONNIE K EBERT

Case No.:
SSN: xxx-xx-6458
SSN:

Debtor(s)

Numbered Listing of Creditors

Address:

**816 GENESEE DRIVE
NAPERVILLE IL 60563**

Chapter: 7

Creditor name and mailing address	Category of claim	Amount of claim
1. AMERICAN EXPRESS BOX 0001 LOS ANGELES CA 90096-8000 xxxx-xxxxxx-x1002	Unsecured Claim	\$15,082.00
2. AMERICAN EXPRESS PO BOX 7871 FORT LAUDERDALE FL 33329 xxxxxxxxxx5333	Unsecured Claim	
3. ASSOCIATED BANK PO BOX 790408 ST LOUIS MO 63179 xxxx-xxxx-xxxx-3032	Unsecured Claim	\$10,300.00
4. BANK OF AMERICA 9000 SOUTHSIDE BLVD BLDG600 JACKSONVILLE FL 32256 xxxxxxxxxx7539	Secured Claim	\$19,023.00
5. BARCLAYCARD CARD SERVICES PO BOX 60517 CITY OF INDUSTRY CA 91716-0517 xxxx-xxxx-xxxx-7930	Unsecured Claim	\$17,473.00
6. CABELAS CLUB VISA PO BOX 82519 LINCOLN NE 68501-2519 xxxxxxxxxxxxx5675	Unsecured Claim	\$12,928.00

in re: **BONNIE K EBERT**

	Debtor	Case No. (if known)	
	Creditor name and mailing address	Category of claim	Amount of claim
7.	CAP ONE 1441 SCHILING PLACE SALINAS CA 93901 xxxxxxxx1117	Unsecured Claim	
8.	CAP1/CARSN PO BOX 15524 WILIMINGTON DE 19850 xxxxxxxxxxxx8971	Unsecured Claim	
9.	CAPITLA ONE BANK NA PO BOX 6492 CAROL STREAM IL 60197-6492 xxxx-xxxx-xxxx-3095	Unsecured Claim	\$21,336.00
10.	CB/ANNTYLR PO BOX 182273 COLUMBUS OH 43218 xxxxxxxx9794	Unsecured Claim	
11.	CBNA 13200 SMITH ROAD CLEVELAND OH 44130 xxxxxx xBERT	Unsecured Claim	
12.	CHASE PO BOX 15123 WILMINGTON DE 19850-5123 xxxx-xxxx-xxxx-6340	Unsecured Claim	\$23,381.00
13.	CITI PO BOX 6500 SIOUX FALLS SD 57117 xxxx-xxxx-xxxx-4222	Unsecured Claim	
14.	DISCOVER CARD PO BOX 6103 CAROL STREAM IL 60197-6103 xxxx-xxxx-xxxx-8551	Unsecured Claim	\$11,176.00
15.	DUPAGE MEDICAL GROUP 15921 COLLECTIONS CENTER DRIVE CHICAGO IL 60693-0159 xxx1107	Unsecured Claim	\$200.00

in re: **BONNIE K EBERT**

Debtor		Case No. (if known)
Creditor name and mailing address	Category of claim	Amount of claim
16. ELAN FINANCIAL SERVICE 777 EAST WISCONSIN AVE MILWAUKEE WI 53202 xxxxxx xBERT	Unsecured Claim	\$10,161.00
17. KOHL/CHASE N56 W17000 RIDGEWOOD DRIVE MENOMONEE FALLS WI 53051 xxxxxx5552	Unsecured Claim	
18. KOHLS/CAP1 PO BOX 3115 MILWAUKEE WI 53201 xxxxxxxxxx9072	Unsecured Claim	
19. STATE FARM BANK PO BOX 23025 COLUMBUS GA 31902-3025 xxxx-xxxx-xxxx-8641	Unsecured Claim	\$14,491.00
20. SYNCB/LORD & TAYLOR PO BOX 981400 EL PASO, TX 79998 xxxxxx xBERT	Unsecured Claim	
21. VON MAUR 6565 BRADY DAVENPORT IA 52806 xxx4679	Unsecured Claim	
22. WELLS FARGO 3476 STATEVIEW BLVD FORT MILL SC 29715 xxxxxxxx9938	Secured Claim	\$134,616.00
23. WORLDS FOREMOST BANK 4800 Nw 1st STE 300 LINCOLN NE 68521 xxxxxx xBERT	Unsecured Claim	\$12,928.00

in re: **BONNIE K EBERT**

Debtor

Case No. (if known)

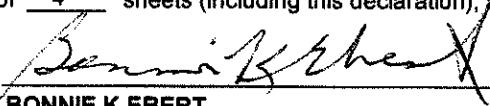
(The penalty for making a false statement or concealing property is a fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. secs. 152 and 3571.)

DECLARATION

I, **BONNIE K EBERT**

named as debtor in this case, declare under penalty of perjury that I have read the foregoing *Numbered Listing of Creditors*,
consisting of 4 sheets (including this declaration), and that it is true and correct to the best of my information and belief.

Debtor:



BONNIE K EBERT

Date: 10/20/2017

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)

IN RE: **BONNIE K EBERT**

CASE NO.

CHAPTER **7**

CERTIFICATE OF SERVICE

I, the undersigned, hereby certify that on October 18, 2017, a copy of the attached Chapter 13 Plan, with any attachments, was served on each party in interest listed below, by placing each copy in an envelope properly addressed, postage fully prepaid in compliance with Local Rules.

Date: _____

Attorney for the Debtor(s)

AMERICAN EXPRESS xxxx-xxxxx-x1002 BOX 0001 LOS ANGELES CA 90096-8000	BONNIE K EBERT 816 GENESEE DRIVE NAPERVILLE IL 60563	CB/ANNTYLR xxxxxxxx9794 PO BOX 182273 COLUMBUS OH 43218
AMERICAN EXPRESS xxxxxxxxxx5333 PO BOX 7871 FORT LAUDERDALE FL 33329	CABELAS CLUB VISA xxxxxxxxxxxx5675 PO BOX 82519 LINCOLN NE 68501-2519	CBNA xxxxxx xBERT 13200 SMITH ROAD CLEVELAND OH 44130
ASSOCIATED BANK xxxx-xxxx-xxx-3032 PO BOX 790408 ST LOUIS MO 63179	CAP ONE xxxxxxxx1117 1441 SCHILING PLACE SALINAS CA 93901	CHASE xxxx-xxxx-xxx-6340 PO BOX 15123 WILMINGTON DE 19850-5123
BANK OF AMERICA xxxxxxxxxx7539 9000 SOUTHSIDE BLVD BLDG600 JACKSONVILLE FL 32256	CAP1/CARSN xxxxxxxxxxxx8971 PO BOX 15524 WILIMINGTON DE 19850	CITI xxxx-xxxx-xxx-4222 PO BOX 6500 SIOUX FALLS SD 57117
BARCLAYCARD xxxx-xxxx-xxx-7930 CARD SERVICES PO BOX 60517 CITY OF INDUSTRY CA 91716-0517	CAPITLA ONE BANK NA xxxx-xxxx-xxx-3095 PO BOX 6492 CAROL STREAM IL 60197-6492	DISCOVER CARD xxxx-xxxx-xxx-8551 PO BOX 6103 CAROL STREAM IL 60197-6103

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION (CHICAGO)

IN RE: **BONNIE K EBERT**

CASE NO.

CHAPTER 7

CERTIFICATE OF SERVICE

(Continuation Sheet #1)

DUPAGE MEDICAL GROUP xxx1107 15921 COLLECTIONS CENTER DRIVE CHICAGO IL 60693-0159	WELLS FARGO xxxxxxxx9938 3476 STATEVIEW BLVD FORT MILL SC 29715
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ELAN FINANCIAL SERVICE xxxxxx xBERT 777 EAST WISCONSIN AVE MILWAUKEE WI 53202	WORLDS FOREMOST BANK xxxxxx xBERT 4800 Nw 1st STE 300 LINCOLN NE 68521
--	--

KOHL/CHASE
xxxxxx5552
N56 W17000 RIDGEWOOD DRIVE
MENOMONEE FALLS WI 53051

KOHLS/CAP1
xxxxxxxxxx9072
PO BOX 3115
MILWAUKEE WI 53201

STATE FARM BANK
xxxx-xxxx-xxxx-8641
PO BOX 23025
COLUMBUS GA 31902-3025

SYNCB/LORD & TAYLOR
xxxxxx xBERT
PO BOX 981400
EL PASO, TX 79998

VON MAUR
xxx4679
6565 BRADY
DAVENPORT IA 52806